FOR NUMBER FILED NUMBER EXTRA BASIC FEE TOTAL CLAIMS MINUS 20 = * OR		•	CL	AIMS AS FILI	ED - PART	ΓΙ						OTHE	R THAN
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MULTIPLE DEPENDENT CLAIM PRESENT If the difference in column 1 is less then zero, enter "0" in column 2 CLAIMS AS AMENDED - PART II (Column 3) CCIAIMS AS AMENDED - PART II (Column 3) REMAINING AFTER AMENDMENT Independent "					minus 3 =	*		7	· .	 	-1		
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the entry in column 1 is less than the entry in column 2, write "0" in column 3. TOTAL OR TOTAL OR TOTAL ADDIT. FEE ADDIT. FEE	the Lhe	entry in column	n 1 is lose tha	a the entry in eat	uma Oi		umn 3.	<u> </u>	TOTAL	· · · · · · · · · · · · · · · · · · ·	_ L		

Application or Docket Number

CLAIMS AS FILED - PART I (Column 1) (Column 2) SMALL ENTITY										OF		THAN ENTITY	
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Application or Docket Number